



# **SHARING HEALTHCARE RESOURCES**

## **VA/TRIBAL SHARING AGREEMENT; ALASKA**

### **PRIMARY CARE ASSOCIATION PLANS**

**U.S. DEPT. OF VETERAN AFFAIRS**

**U.S. INDIAN HEALTH SERVICE/DHHS**

**U.S. HEALTH RESOURCES & SERVICES ADMIN/DHHS**

**ALASKA TRIBAL HEALTH SYSTEM**

**ALASKA PRIMARY CARE ASSOCIATION**

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**Alaska Health Care Commission Meeting**

**June 14, 2012**

# PRESENTERS

- **Susan Yeager**, Rural Health Program  
Coordinator, Department of Veterans Affairs,  
Veterans Health Administration
- **Myra Munson**, Attorney, Sonosky, Chambers,  
Sachse, Miller & Munson, Juneau
- **David Morgan**, Reimbursement Director,  
Southcentral Foundation

## ALASKA HAS MORE VETERANS

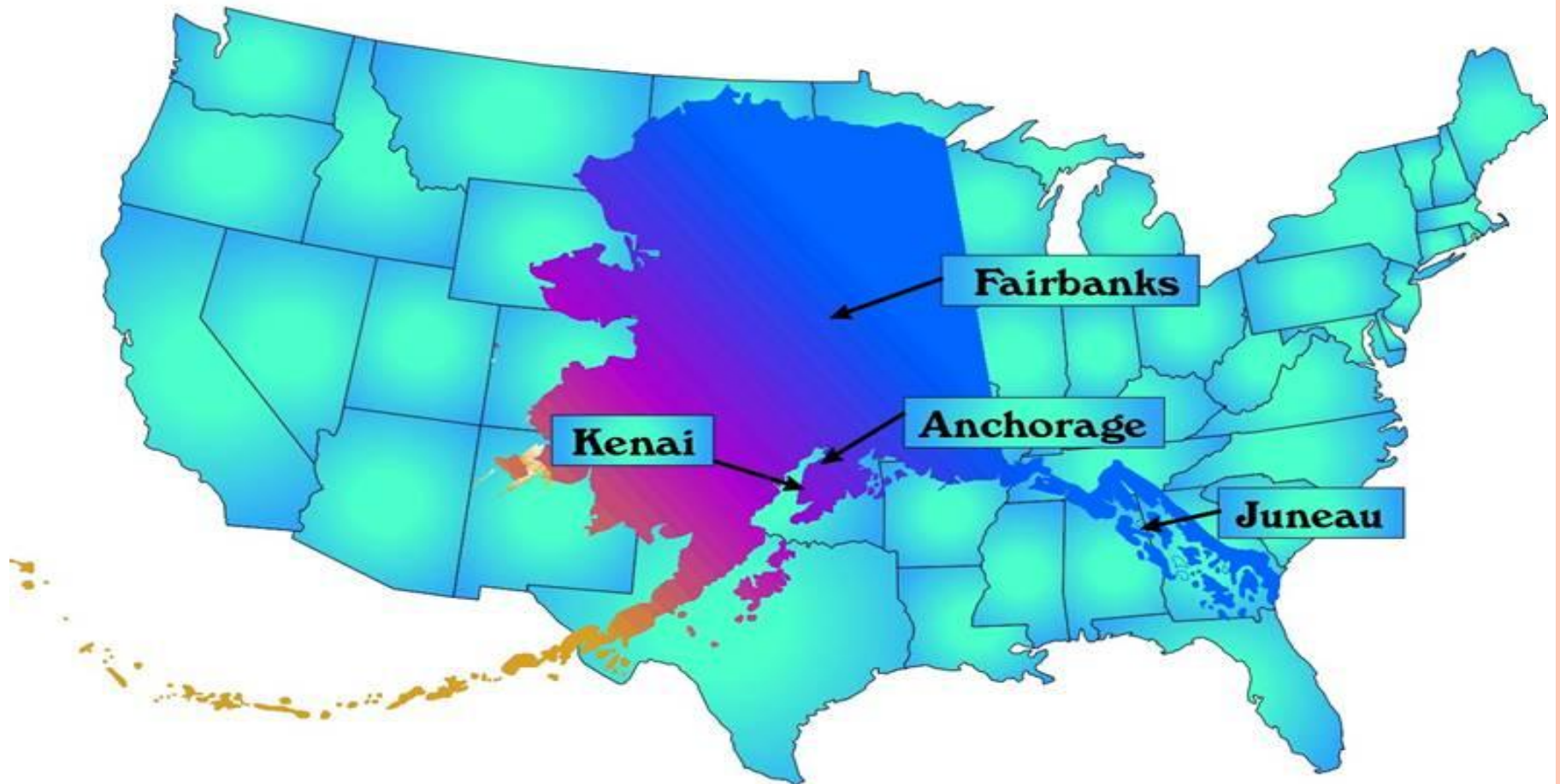
Alaska has a noticeably higher percentage of veterans than the nation as a whole

- Approximately one out of every four Alaska men age 18 or older is a veteran – 24 percent-in contrast to 18 percent nationwide. Alaska women were more likely to be veterans in 2010 – 4 percent in Alaska as opposed to 1 percent for U.S.

(Alaska Economic Trends – May 2012, Page 15)

# AND NOT TOO MANY VA FACILITIES...

ALASKA

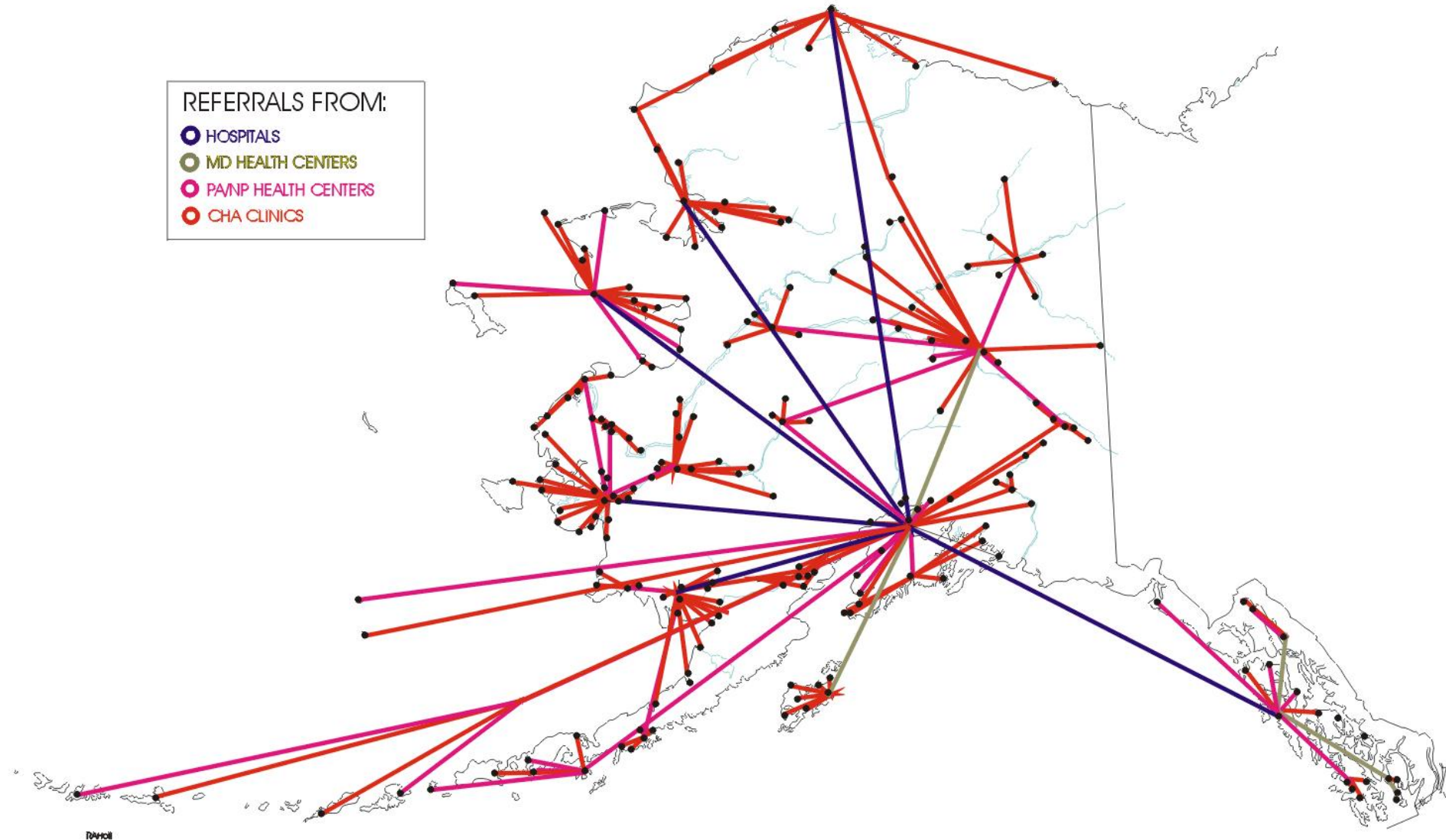


# THE ALASKA NATIVE HEALTH CARE SYSTEM

## Typical Referral Patterns

REFERRALS FROM:

- HOSPITALS
- MD HEALTH CENTERS
- PAINP HEALTH CENTERS
- CHA CLINICS



# LEGAL AUTHORITY – CREATES OPPORTUNITIES

*38 U.S.C. § 8153 – VA Sharing Agreements*

*25 U.S.C. § 1645(c) – Indian Health Program right to be reimbursed by VA and DOD “where services are provided through an Indian Health Program to beneficiaries eligible for services from either such Department, notwithstanding any other provision of law. (Effective March 23, 2010)*



# **VA/IHS MOU: IMPLEMENTED ALASKA 13<sup>TH</sup> WORKGROUP**

- Alaska 13<sup>th</sup> Workgroup established at the direction of VA Under Secretary for Health, Dr. Robert Petzel.**
- Group sponsored by Alaska Native Health Board, Ms. Lanie Fox, President/CEO and chaired by Mr. Lincoln Bean.**
- Charter approved and first meeting September 30, 2011.**
- Co-Facilitated by Alaska Native Representative, Libby Watanabe; Director of Alaska Area Native Health Service, IHS, DHHS, Chris Mandregan; and Alaska VA Healthcare System Rural Health Program Coordinator, Susan Yeager.**
- Activities and work are in alignment with national IHS/MOU.**
- Work plan developed for FY2012.**



# VA-TRIBAL ALASKA WORKGROUP

## SHARING GOALS

1. Increase access to Service and Benefits of IHS and VA (Including the Veterans Benefits and Cemetery Administration) to Alaska Native Veterans.
  - Endorse and support Tribal Veteran Representative (TVR) training and support of the state-wide Network.
  - Endorse ongoing training of Native Health Care Organization to understand VA process for authorization and billing
  - Support ongoing State-wide Veteran Outreach activities to enroll Veterans and provide assistance for Veteran Benefits.



# VA–TRIBAL (IHS) ALASKA WORKGROUP SHARING GOALS

2. Improve coordination of care, including co-management for Alaska Veterans
  - Support the development of Sharing Agreements and MOU between VA and Tribal Health organization to increase the access to healthcare services and to co-manage Native Veteran with the focus on specialty and tertiary care not available in rural communities.
  - Support the establishment of workgroup to develop Sharing Agreement template to address Veteran registration, authorization and reimbursement issues.

# AD-HOC COMMITTEE ON REIMBURSEMENT

- Formed in February 2012
- Task – Negotiate Sharing and Reimbursement Agreements between VA, Health Administration and Alaska Tribal Health Programs
- VA represented at every operational level to make agreements possible
- First Alaska agreements signed May 4; now more than 18 in effect.

# McGRATH VETERAN OUTREACH



# PRINCIPLES

- *VA committed to meeting health care needs of all Eligible Veterans and has special expertise in care of Veterans, but has very few facilities*
- *Tribal Health Programs are found throughout the State, including virtually all villages and have cultural expertise in serving Alaska Native Veterans.*
- *All Alaska Veterans should have maximum access to health care services with minimum travel.*
- *Tribal Health Programs may choose to serve non-beneficiaries, but are not required to do so.*
- *Alaska Native Veterans may choose whether they want to get their health care at their Tribal Health Program or at VA.*

# WHO ARE THE PARTIES

*IHS and VA have negotiated a draft, but each Tribal Health Program that wants an Agreement with VA may negotiate its own terms.*

*Alaska VA/Tribal Model Agreement – A model was negotiated by VA and the Ad Hoc Committee. Each Tribal Health Program completes its own Agreement with VA, although they are nearly identical so far to make administration easier for VA.*



# WHICH VETERANS ARE COVERED?

All of them! Tribal Health Programs will be reimbursed for services provided to Eligible Veterans, if the Eligible Veteran is:

- Alaska Native Veterans with no preauthorization requirements;
- Non-Alaska Native Veterans if the care is preauthorized.

Annual preauthorization (6 medical and 4 behavioral health visits) will be granted by VA for non-AN Veterans living in locations where there is no VA health care program, plus more as justified.



# WHAT'S COVERED

Any health care service for which an eligible veteran is eligible under VA statutes and regulations. These are:

*VA Medical Benefits package under 38 C.F.R. § 17.38:* basic care, outpatient medical, surgical, mental health, substance abuse, prescription drugs including OTC, emergency care, bereavement counseling, rehabilitative services, marriage & family therapy, DME, home health, hospice, extended care services (inc. adult day care and respite care), travel, preventive care, health education, eye care, genetic counseling, immunizations. And, for some Veterans dental, travel, and other services.



# SPECIAL TERMS

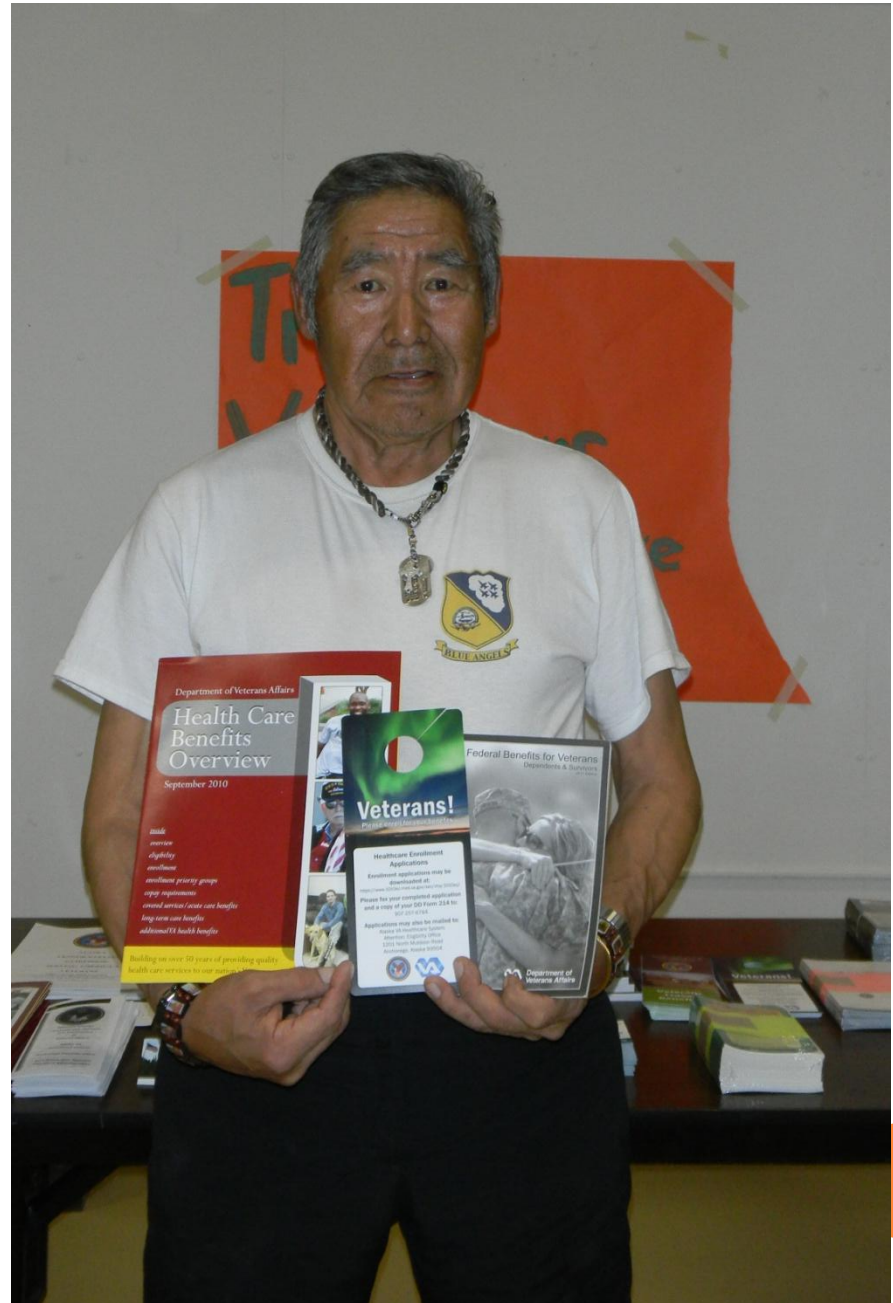
- Services provided by Certified Community Health Aides will be reimbursed.
- Reimbursement will be largely based on IHS Published Medicaid Inpatient and Outpatient Encounter rates and VA Professional Fee Schedule.
- The Tribal Health Programs will pay any co-pays imposed by VA on Alaska Native Veterans.
- Home care, nursing home care, residential mental health and substance abuse treatment, hospice will be reimbursed on rates still being negotiated.

# WHAT ARE THE CHALLENGES?

- Making sure that all Alaska Veterans enroll in VA
- Learning how each other's systems really work
- Coordinating care
- Sharing expertise
- Making the systems seamless for Veterans



# NILAVENA CLINIC (ILIAMNA) VETERAN OUTREACH



# VA NON-TRIBAL ALASKA WORKGROUP SHARING GOALS

- With the completion of VA- Tribal (IHS) MOU and Sharing Agreement Template the momentum is in place to complete the Non-IHS Alaska VA MOU and Agreement Template.
- The proposed Workgroup would develop the Draft Agreement for review and approval of the Alaska Primary Care Association Board.

# ALASKA PRIMARY CARE ASSOCIATION

- Since its founding (1995 not-for-profit), APCA has grown to serve over 50 members through out Alaska. APCA members include “safety-net” primary care providers such as Alaska’s community health centers, rural health clinics, tribal health corporations, community clinics and private practices.

# CHC NETWORK (APCA) IN ALASKA

- 26 Community Health Center Programs (CHCs) - Funded by HRSA Section 330 Public Health Service Act (15 Tribal-IHS) and 11 Non-Tribal )
- 142 clinic delivery sites (60% Tribal and 40% Non-Tribal)
- Over 88,000 patients
- 369,398 patient visits
- Tribal Health Programs including their CHCs Programs have Sharing Health Care Resources - VA Agreements.

# CHC PROGRAMS (NON-TRIBAL) NETWORK (APCA) IN ALASKA

- 11 Non-Tribal CHCs Programs
- 27 Clinic Delivery Sites
- Non-Tribal Programs and Delivery Sites do not have Sharing Health Care Resources – VA Agreements
- Next phase is to develop – VA Agreements for Non-Tribal Delivery Sites.



# PROPOSED NON-TRIBAL AGREEMENT SCHEDULE

- June 30, 2012 – Formation of APCA Workgroup (Approval of APCA Board)
- October 1, 2012 – Organize and begin the development of draft for review of Workgroup (VA and APCA Team)
- January 2013 – Presentation of draft Agreement Template for APCA Board review and Approval